



The Confederated Tribes of the Colville Reservation

Enrollment Department

Payee Form



Each minor child shall have a payee on their behalf until the minor reaches age of majority, which is the age of 18. The biological parent or legal guardian shall provide the name of the payee. It is the responsibility of the payee to notify Colville Tribal Enrollment department immediately of any payee changes that may affect the minor so a new payee can be selected. When you are no longer responsible for the minor, you must return all payments to the Enrollment department if any received while the child was no longer under your custody and care. The funds will then be reissued to the new payee. If notification is not provided, as the last known payee, you are responsible for the repayment of all payments received on behalf of the minor.

Name of Payee: _____ DOB: ____ / ____ / ____

Mailing Address: _____

Physical Address: _____

Phone: (____) _____ Address Within Reservation Boundaries: Yes No

Relationship to Minor: Parent: ID#: _____ / Non-Enrolled Parent Legal Guardian

I request the following for each of the minor children listed below:

- All tribal payments be placed into the minor's IIM account.
- To receive the Per Capita disbursements
- To receive the 181-D (Grand Coulee Dam) Half Share disbursements

Minor Children:

Enroll. No.	Child's Name	Date of Birth
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____

By signing below, I agree I have the authorization to determine the payee for minors listed above:

(If married, both parent signatures required unless a court order is provided stating custody)

Biological Mother: _____ Date: _____

Biological Father: _____ Date: _____

Legal Guardian: _____ Date: _____

Return to: Enrollment Department
PO Box 150
Nespelem, WA 99155

Ph: 509-634-2830
Fax: 509-634-2874

(Form updated: 10/21/2014)